

INSURANCE COVERAGE

In order that subrogation claims may be adjudicated, it is essential that the claimant provide the following information regarding the insurance coverage of the vehicle or property.

15. Do you carry accident Insurance? ☐ Yes If yes, give name and address of insurance company (Number, Street, City, State, and Zip Code) and policy number. ☐ No

16. Have you filed a claim with your insurance carrier in this instance, and if so, is it full coverage or deductible? ☐ Yes ☒ No 17. If deductible, state amount.

18. If a claim has been filed with your carrier, what action has your insurer taken or proposed to take with reference to your claim? (It is necessary that you ascertain these facts).

N/A

19. Do you carry public liability and property damage insurance? ☒ Yes If yes, give name and address of insurance carrier (Number, Street, City, State, and Zip Code). ☐ No

(b)(6)

INSTRUCTIONS

Claims presented under the Federal Tort Claims Act should be submitted directly to the "appropriate Federal agency" whose employee(s) was involved in the incident. If the incident involves more than one claimant, each claimant should submit a separate claim form.

Complete all items - Insert the word NONE where applicable.

A CLAIM SHALL BE DEEMED TO HAVE BEEN PRESENTED WHEN A FEDERAL AGENCY RECEIVES FROM A CLAIMANT, HIS DULY AUTHORIZED AGENT, OR LEGAL REPRESENTATIVE, AN EXECUTED STANDARD FORM 95 OR OTHER WRITTEN NOTIFICATION OF AN INCIDENT, ACCOMPANIED BY A CLAIM FOR MONEY

Failure to completely execute this form or to supply the requested material within two years from the date the claim accrued may render your claim invalid. A claim is deemed presented when it is received by the appropriate agency, not when it is mailed.

If instruction is needed in completing this form, the agency listed in item #1 on the reverse side may be contacted. Complete regulations pertaining to claims asserted under the Federal Tort Claims Act can be found in Title 28, Code of Federal Regulations, Part 14. Many agencies have published supplementing regulations. If more than one agency is involved, please state each agency.

The claim may be filled by a duly authorized agent or other legal representative, provided evidence satisfactory to the Government is submitted with the claim establishing express authority to act for the claimant. A claim presented by an agent or legal representative must be presented in the name of the claimant. If the claim is signed by the agent or legal representative, it must show the title or legal capacity of the person signing and be accompanied by evidence of his/her authority to present a claim on behalf of the claimant as agent, executor, administrator, parent, guardian or other representative.

If claimant intends to file for both personal injury and property damage, the amount for each must be shown in item number 12 of this form.

DAMAGES IN A SUM CERTAIN FOR INJURY TO OR LOSS OF PROPERTY, PERSONAL INJURY, OR DEATH ALLEGED TO HAVE OCCURRED BY REASON OF THE INCIDENT. THE CLAIM MUST BE PRESENTED TO THE APPROPRIATE FEDERAL AGENCY WITHIN TWO YEARS AFTER THE CLAIM ACCRUES.

The amount claimed should be substantiated by competent evidence as follows:

(a) In support of the claim for personal injury or death, the claimant should submit a written report by the attending physician, showing the nature and extent of the injury, the nature and extent of treatment, the degree of permanent disability, if any, the prognosis, and the period of hospitalization, or incapacitation, attaching itemized bills for medical, hospital, or burial expenses actually incurred.

(b) In support of claims for damage to property, which has been or can be economically repaired, the claimant should submit at least two itemized signed statements or estimates by reliable, disinterested concerns, or, if payment has been made, the itemized signed receipts evidencing payment.

(c) In support of claims for damage to property which is not economically repairable, or if the property is lost or destroyed, the claimant should submit statements as to the original cost of the property, the date of purchase, and the value of the property, both before and after the accident. Such statements should be by disinterested competent persons, preferably reputable dealers or officials familiar with the type of property damaged, or by two or more competitive bidders, and should be certified as being just and correct.

(d) Failure to specify a sum certain will render your claim invalid and may result in forfeiture of your rights.

PRIVACY ACT NOTICE

This Notice is provided in accordance with the Privacy Act, 5 U.S.C. 552a(e)(3), and concerns the information requested in the letter to which this Notice is attached.

A. **Authority:** The requested information is solicited pursuant to one or more of the following: 5 U.S.C. 301, 28 U.S.C. 501 et seq., 28 U.S.C. 2671 et seq., 28 C.F.R. Part 14.

B. **Principal Purpose:** The information requested is to be used in evaluating claims.

C. **Routine Use:** See the Notices of Systems of Records for the agency to whom you are submitting this form for this information.

D. **Effect of Failure to Respond:** Disclosure is voluntary. However, failure to supply the requested information or to execute the form may render your claim "invalid."

PAPERWORK REDUCTION ACT NOTICE

This notice is solely for the purpose of the Paperwork Reduction Act, 44 U.S.C. 3501. Public reporting burden for this collection of information is estimated to average 6 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Director, Torts Branch, Attention: Paperwork Reduction Staff, Civil Division, U.S. Department of Justice, Washington, DC 20530 or to the Office of Management and Budget. Do not mail completed form(s) to these addresses.

08/13/2015

To whom it may concern:

My family and I have been planning a trip to the Durango area for many months. We have been alarmed by the recent events regarding the release of contaminated water into the Animas River and surrounding lakes.

Our vacation was to be centered on fun river activities and events. We have cancelled our trip amid health concerns and alarming published reports.

"The heavy-metals-laden contaminants turned the Animas River a shade of mustard fit for a Crayola crayon box." CNN

"Leading toxicologists say there could be health effects for many years to come from heavy metals such as lead and mercury that spilled into the water. Exposure to high levels of these metals can cause an array of health problems from cancer to kidney disease to developmental problems in children." CNN

"According to sampling done by the EPA on various points along the Animas River Wednesday and Thursday last week, levels of lead, arsenic, beryllium, cadmium and mercury were extremely high compared with acceptable levels set by the agency, which are technically called "maximum contaminant levels" or "action levels for treatment."

One of the samples of mercury was nearly 10 times higher than the EPA acceptable levels. Samples of beryllium and cadmium were 33 times higher, and one of the arsenic levels was more than 800 times higher.

Exposure to high levels of these metals can cause an array of health problems from cancer to kidney disease to developmental problems in children." EPA

I have decided that a fun time in Colorado is not worth risking the health of my family. Concerns for drinking water safety, unnecessary exposure to toxic material and the loss of entertainment opportunities has forced us to cancel our vacation and make other plans

Due to these circumstances beyond our control we are requesting our full prepaid expenditure of (b)(4) be refunded in a timely manner.

Thank you for your understanding.

Sincerely,

(b)(6)



Reservation Request

(b)(4)

Quote

Rental amount:

Cleaning fee

Tax:

Subtotal:

Refundable Damage Deposit:

Total:

(b)(4)

Payment schedule

Payment 1 of 1

Guest Paid: 03/01/2015 - (b)(6) (173 days prior to check in)

Your rental agreement was accepted on 03/01/2015 at 7:12 PM by (b)(6)

(b)(4)


 **The final payment is due by Mar 1, 2015**

Policies and Agreements

Cancellation policy

30 days

100% refund for cancellations more than 30 days before check-in date

 **Add payment request**

Dear (b)(6),

Thank you for your reservation request for vacation rental (b)(6)
(b)(6) Durango, Colorado.

I have attached the VRBO rental agreement to this email. Please fill out, sign and return to me via email, or US mail within 30 days to finalize your requested rental days.

I look forward to meeting you and your family during your vacation stay here in Durango.

Sincerely,

(b)(6)
(b)(6)
(b)(6)
(b)(6)

✓ You responded within 43 minutes.

Reservation Request Accepted

Dear (b)(6)

I have confirmed your reservation at property (b)(6) for Aug 21, 2015 - Aug 29, 2015.

As a reminder, your payment has been processed and will appear as PAY*HOMEAWAY on your statement.
I will be in contact with you prior to your arrival with access instructions.

Please let me know if you have any questions regarding your upcoming stay.

Sincerely,

(b)(6)
(b)(6)

(b)(6)

 Edit

Source: OLB Phone: (b)(6) Email address: (b)(6)

Aug 21 – 29, 2015 8 nights • 11 guests

\$4,398.20 View ▼

Replied

 1

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